

POSITION:	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		06-28-01
O.I.P.E. CLASSIFIER		10	7-10-01
FORMALITY REVIEW	YG	955	08/15/01
RESPONSE FORMALITY REVIEW	mu	1019	11-08-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
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6	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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10/5/02
50/902